

CERTIFYING OFFICER
STATEMENT OF AGREEMENT

1. By signature hereon, I acknowledge my appointment as a certifying officer. I have received and fully understand the written and oral instructions pertaining to the certification of GPC official invoices from the Finance Officer or designated representative. I have read and understand my responsibilities and accountability.
2. I understand that I have entered an agency relationship with the Finance Officer. I further understand that I can be held pecuniary liable in my own right or in conjunction with the Finance Officer for payments that I have certified, which later are determined to be illegal, improper, or incorrect. I understand that this appointment will remain in effect until revoked in writing by you (or your successor).
3. Attached for your approval is the completed DD Form(s), 577, Signature Card.

Certifying Officer Name (Print)

Certifying Officer Signature

Date

Phone